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Application Number: 10/072,396

Filing Date: 2/5/2002

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1. Fee Transmittal
2. Response to Office Action dated 11/15/2005
3. Information Disclosure Statement
4. PTO Form 1449

Total pages including cover sheet: 11  
MS1-1006US  
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PTO/SB/17 (12-04)

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Effective on 12/00/2004. Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4010).	
<b>Fee Transmittal For FY 2005</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$ 180.00)</b>
<b>Complete if Known</b>	
Application Number	10/072,396
Filing Date	2/5/2007
First Named Inventor	Richard St. Clair Bailey
Examiner Name	Michael Roswell
Art Unit	2173
Attorney Docket No.	MS1 1008U3

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC	
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**FEES CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  
 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

**Multiple Dependent Claims**

Total Claims	Extra Claims		Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		Fee (\$)	Fee Paid (\$)
	Total	MP =			x	50		
	- 20 or MP =						10	25
	HP - highest number of total claims paid for, if greater than 20						200	100

Inden. Claims      Extra Claims      Fee (\$)

Inden. Claims      Extra Claims      Fee (\$)

- 3 or MP =      x      200 =      Fee (\$)

HP - highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 11(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)

100 =      / 50 =      (round up to a whole number)      Fee (\$)

Fee Paid (\$)

**4. OTHER FEE(S)**

Non-English Specification: \$130 fee (no small entity discount)

Other: Information Disclosure Statement

180.00

SUBMITTED BY	Mark C. Farrell	Registration No. 45988	Telephone (609) 324-9256
Signature	Mark C. Farrell		Date 11-18-05
Name (Print/Type)	Mark C. Farrell		

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